






PTO/SB/22 (12-04)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 033082 M 244																										
Application Number 10/525,207		Filed March 14, 2006																										
For GAS SUPPLY SYSTEM AND PROCESSING SYSTEM																												
Art Unit 1792	Examiner Satish Chandra																											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$130</td><td>\$65</td><td>\$_____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$490</td><td>\$245</td><td>\$<u>490.00</u></td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1110</td><td>\$555</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1730</td><td>\$865</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2350</td><td>\$1175</td><td>\$_____</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-4300</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,263</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p> <table><tr><td> _____ Signature Michael A. Makuch _____ Typed or printed name</td><td>_____ January 21, 2009 _____ Date (202) 263-4300 _____ Telephone Number</td></tr></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$_____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ <u>490.00</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$_____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$_____	 _____ Signature Michael A. Makuch _____ Typed or printed name	_____ January 21, 2009 _____ Date (202) 263-4300 _____ Telephone Number
	<u>Fee</u>	<u>Small Entity Fee</u>																										
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$_____																									
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ <u>490.00</u>																									
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$_____																									
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$_____																									
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$_____																									
 _____ Signature Michael A. Makuch _____ Typed or printed name	_____ January 21, 2009 _____ Date (202) 263-4300 _____ Telephone Number																											

01/22/2009 SMOHAMME 00000123 10525207

01 FC:1252

490.00 0P